

**Political Organization
Report of Contributions and Expenditures**

OMB No. 1545-1696

► See separate instructions.

A For the period beginning 01/01/2013 **and ending** 06/30/2013

B Check applicable box: ☒ Initial report ☐ Change of address ☐ Amended report ☐ Final report

1 Name of organization The Constitution Trust **Employer identification number** 45 - 4888484

2 Mailing address (P.O. box or number, street, and room or suite number)
PO Box 98871

City or town, state, and ZIP code
Raleigh, NC 27624

3 E-mail address of organization: no@email **4 Date organization was formed:** 03/26/2012

5a Name of custodian of records Roger W. Knight **5b Custodian's address** 8510 Six Forks Road Suite 102
Raleigh, NC 27615 -

6a Name of contact person Roger W. Knight **6b Contact person's address** 8510 Six Forks Road Suite 102
Raleigh, NC 27615 -

7 Business address of organization (if different from mailing address shown above). Number, street, and room or suite number
PO Box 98871

City or town, state, and ZIP code
Raleigh, NC 27624

8 Type of report (check only one box)

- | | |
|--|---|
| <input type="checkbox"/> First quarterly report
(due by April 15) | <input type="checkbox"/> Monthly report for the month of:
(due by the 20th day following the month shown above, except the
December report, which is due by January 31) |
| <input type="checkbox"/> Second quarterly report
(due by July 15) | <input type="checkbox"/> Pre-election report (due by the 12th or 15th day before the election) |
| <input type="checkbox"/> Third quarterly report
(due by October 15) | (1) Type of election: |
| <input type="checkbox"/> Year-end report
(due by January 31) | (2) Date of election: |
| <input checked="" type="checkbox"/> Mid-year report (Non-election
year only-due by July 31) | (3) For the state of: |
| | <input type="checkbox"/> Post-general election report (due by the 30th day after general election) |
| | (1) Date of election: |
| | (2) For the state of: |

9 Total amount of reported contributions (total from all attached Schedules A).....9. \$ 1

10 Total amount of reported expenditures (total from all attached Schedules B).....10. \$ 497

Under penalties of perjury, I declare that I have examined this report, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Kristen A. Snyder

07/15/2013

**Sign
Here**



Signature of authorized official



Date

Schedule AItemized Contributions		Schedule A
Contributor's name, mailing address and ZIP code Aggregate Below Threshold PO Box 98871 Raleigh, NC 27624	Name of contributor's employer	
	Contributor's occupation	Amount of contribution
	Aggregate contributions year-to-date	Date of contribution

Schedule B **Itemized Expenditures**

Schedule B

Recipient's name, mailing address and ZIP code**Name of recipient's employer****Amount of Expenditure**

Aggregate Below Threshold

N/A

\$ 497

PO Box 98871

Recipients's occupation**Date of expenditure**

Raleigh, NC 27624

N/A

06/30/2013

Purpose of expenditure

Banking service charges and Accounting Fees.